

Permit Application	#:			
Plans Submitted:		Approved:		
Date of Application:	Da	ate of Issue:		
□New □Alteration	□Addition	□Demolish	□Repair	

All applications must give name and address of owner				
Property owners applying for permits must complete t NOTE: Separate permits are required for building *Please request a Sign Permit Application from ou **Driveway entrance/curb cuts go through the Pub	, mechanical, electrical, plu r Zoning Department if Sig	mbing, & fire protection		
Applicant Information:	one worms beparement	Owner Infor	mation (if a	other than applicant):
P.F		☐ check if same		<i>Y</i> F
Name:				
Company Name:		Company Name:		
Address:				
City/State/Zip:		City/State/Zip:		
Phone Number:				
Email Address:		Email Address:		
□ Owner □ Contractor □ Ag	gent			
Project Address:		Tax	Map Nun	nber:
ZONING: Zoning District:				
Enterprise Zone: Yes No	Allowable	Use:		
Historic District: ☐ Yes ☐ No	<u>Setbacks</u> :	Front:	Rear:	Side(s):
Approval:	Zoning Adm	inistrator		Date
Building (B)	#of Floors:	Est Cost:		Dimensions:
Square Footage:				
Fee:Description of Work:_				
Demolition (D)	_#of Floors:	Est Cost:		Dimensions:
Square Footage:	_ 🗖 Asbestos Sign-C	Off Attached		
Fee: Description of Work:_				
Flactuicale (F)	Est Cast.		Camaiaa	Siza (A mana)
Electrical: (E)	Est Cost: Work:		Service	e Size (Amps):
recDescription of	W 01K			
Mechanical: (M)	BTU/Ton:	Est Cost:		Fee:
Description of Work:				
Plumbing: (P) Fee: Description of Work:_	_#of Fixtures:	Est Cost:		Water/Sewer line:
Fee: Description of Work:_				
G Five (G)	" CE: +	E · C ·		
Gas Fitting: (G) Fee: Description of Work:_	_#of Fixtures:	Est Cost:		
ree: Description of work:_				
Fire Protection System: (F)	#of Floors	Est Cost		Wet/Drv·
Fee: Description of Work:		Est Cost		
Description of Work.				
Land Disturbance: (L)	_ Acreage Disturbed	·	Fee:	
Description of Work:				
Sign: (S) Height of Sign	:Est Cost:	Dime	ensions:	Fee:
Square Footage: Illuminated Si	gn: Yes No Des	scription of Work:	3.6	
Type of Sign: □Ground □Wall □Room	t 🗆 Femporary 🗖 Oth	ner:Sign	Materials:	

General Demolition			1	
Electrical				
Mechanical				
Plumbing				
Gas Fitting				
Framing				
Sprinkler				
Amusement				
Device				
Land Dist.				
Sign				
	n Agent Information, if provided, residentia Address: Phone:			
	Applicant OWNERS	 S AFFIDAVIT	Date	
	e prerequisites of Section 54. 1-1111 of the Code am also aware that it is a violation of State Law ty:			
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Locustractor. I cknowledged be a construction To the change of Use	am also aware that it is a violation of State Law ty: Owner See Only Sype: I	to hire or award a con ————————————————————————————————————	Date Steeted Construction Troup:	n (A)